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APPLICANTS

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** CONTINUING DATA *****
 NONE *DL*

** FOREIGN APPLICATIONS *****
 NONE *DL*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 03/09/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY WA	SHEETS DRAWING 9	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 5
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ADDRESS
 27518
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TITLE
 Asymmetric-area memory cell

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